

Laparoscopic Gastric Bypass

Wound Care

- Change the dressings (bandages) as instructed by your doctor until he says you no longer need them. Change them more often if they get dirty or wet.
- Gently wash the wound areas with mild soap and water. Pat them dry with a clean towel. Do not rub dry.
- You may remove the dressings and take a shower if sutures (stitches), staples or glue were used to close your skin, but only after your doctor says it is alright.
- Do not try to wash off or peel off the steri-strips or glue. They will come off or fall off on their own.
- Do not soak in a bathtub, swimming pool or hot tub until your doctor tells you it is alright.

Activity Restrictions

Begin to walk as soon as possible after surgery. Move around the house and use the stairs at home during the first week. If it hurts to do any activity, stop doing it. You should be able to resume most of your usual activities in four to eight weeks. Until then:

- Do not lift anything heavier than 10-15 pounds until your doctor says it is alright. Do not do any activity that involves pushing or pulling.
- You may take short walks inside or outside and you may go up and down stairs.
- Do not push yourself too hard. Increase activity slowly.
- If you are taking narcotic pain medication, do NOT drive or use machinery. These medications may make you drowsy.
- If you have pain in your belly, moving around may help.
- You should be able to start exercising regularly six weeks after surgery if your doctor says it is alright.

Proton Pump Inhibitor (PPI):

After surgery it is important you take a PPI to help reduce the stomach acid. If your surgeon did not give you a prescription, you may take over the counter Prilosec, Nexium, Prevacid or Zegerid. Try and take it the same time each day. You will probably be on this medication for three to four months. Ask your surgeon when he would like you to stop.

Taking Your Medications

It is best if you take medications in liquid (sugar-free) or chewable form. If your medication only comes in pill form, choose smaller pills, if available. Ask your pharmacist or doctor if medication can be broken. Take only one pill at a time. Wait several minutes between pills. Never take several at once, because it may lead to blockage.

Pain Management

- Do not hesitate to take pain medication prescribed by your doctor.
- Do not take ibuprofen (Advil, Motrin), naproxen (Aleve), or aspirin (Excedrin) as these may harm the lining of your stomach. Talk to your doctor if you feel you need to take these drugs. It is acceptable to take acetaminophen (Tylenol).

Diet

Refer to the Weight Loss Surgery Nutrition Advancement Guide that you should have received before surgery. You may request another copy before leaving. Some reminders:

- Stop sipping as soon as you feel full. Never force yourself to finish.
- Amounts: One to two ounces every 30 minutes. Your goal is to consume at least 32 ounces of fluids each day.

Signs and Symptoms to Report

- Your temperature is above 101°F
- Your incisions are bleeding, red, warm to the touch or have a thick, yellow, green, or milky drainage
- You have pain that your pain medication is not helping
- You cannot drink or eat
- You are vomiting after eating
- Your skin or the white part of your eyes turns yellow
- Your stools are loose or you have diarrhea
- You become short of breath and/or experience worsening chest pain
- You develop a pain in your leg
- You develop a rapid heart rate

Dumping Syndrome

Differing symptoms of dumping syndrome can occur during your meal or up to one to three hours after eating. Early symptoms (during a meal to 15-30 minutes following a meal) may include nausea, vomiting, abdominal pain, cramps, diarrhea, dizziness, lightheadedness, bloating, belching, fatigue, heart palpitations and rapid heart rate. Late symptoms (one to three hours after eating) may include diarrhea, dizziness, lightheadedness, fatigue, heart pounding, rapid heart rate, sweating, weakness, shakiness, feelings of anxiety, nervousness, fainting, mental confusion and low blood sugar (hypoglycemia). To avoid dumping syndrome:

- Avoid sugar and high carbohydrate food
- Do not overeat or drink with meals

Follow-Up Appointments

- You will have several visits with your doctor in the first year after surgery. You may also see your dietitian and bariatric manager.
- You will have a visit with your doctor in the first two to three weeks after your surgery. Your doctor will check your wounds and review how your diet is going.
- After this, your visits will likely be every one to two months.
- Your goal for weight loss will be approximately two to four pounds a week.
- You will need blood tests for the rest of your life to check that your body is getting enough iron, vitamin B-12, vitamin A, vitamin D, folate and protein.

Special Instructions

Follow up with exercise and support groups is very important to your success, both in losing weight and in keeping it off. It is highly recommended that you attend a bariatric support group session once a month. In this group, you will continue to learn how to manage your new ways of eating, your new body and the changes in relationships that you may encounter. Go to BayCareWeightLoss.org for more information or for a support group schedule.